

additional generous support for relief and long-term reconstruction efforts in areas affected by the earthquake; and

(6) urges continued attention by international donors and relief agencies to the needs of vulnerable populations in the stricken countries, particularly the thousands of children who have been left parentless and homeless by the disaster.

Ms. MIKULSKI. Mr. President, today I am submitting a resolution commending relief efforts in response to the earthquake in South Asia and urging a commitment by the United States and the international community to help rebuild critical infrastructure in the affected areas.

On October 8, 2005, a devastating magnitude 7.6 earthquake hit remote mountainous regions of northern Afghanistan, Pakistan and India. More than 75,000 people have died, nearly 70,000 have been injured and 2.8 million remain homeless. On a bipartisan basis, the President and members of Congress joined the world community in expressing our sympathy and pledging our assistance to help those suffering in the face of this terrible disaster.

But expressions of sympathy are not enough. The United States must set an example and lead the world in the humanitarian effort of recovery and rebuilding. That's why I supported the initial pledge of \$156 million in humanitarian aid from the United States.

The Department of Defense, the State Department and the U.S. Agency for International Development (USAID) have taken the lead in making good on that pledge. USAID has provided more than \$50.1 million in assistance to Pakistan and more than \$600,000 to India. The Defense Department has so far spent about \$56 million on relief efforts, including sending more than 1,000 troops into Pakistan to provide urgent medical care, delivering much-needed supplies and clearing roads and opening routes for ground transportation so more help can reach those most in need.

The American private sector has also pitched in. U.S. charities have raised more than \$21 million to support earthquake relief efforts. Non-government organizations like Catholic Relief Services, Mercy Corps and Save the Children all have a presence in Pakistan and are providing aid and relief. At President Bush's request, five major American corporations are encouraging additional private donations. General Electric, Pfizer, Citigroup, Xerox and UPS are coordinating a nationwide fund raising effort through the South Asia Earthquake Relief Fund. To date, more than \$46 million has been donated by American corporations.

As Americans, we can all be proud of these efforts to help the people of South Asia survive, recover and rebuild. I applaud President Bush and his administration for acting quickly to provide relief and support. But I know that, together, we can do better.

That's why I support the immediate reprogramming by USAID of assistance funds for Pakistan in the FY 2006 For-

eign Operations Act to help meet the immediate, emergency need for medical care and shelter. The nearly 3 million Pakistanis left homeless by the earthquake are already facing snow and freezing rain. Conservative estimates suggest another 80,000 people could die from exposure in the next few months without a massive effort to provide thousands of heated tents. Those people can not afford to wait for the next supplemental appropriations bill—we must act now.

The United States should also engage with the international community to boost relief and recovery efforts. The United Nations has already responded, convening a donors' conference to organize international relief efforts. Economic institutions like the World Bank and the Paris Club can assist long-term recovery efforts by re-examining their debt policy toward the affected countries. And members of NATO and the European Union must step-up their support for relief and recovery. NATO in particular has unique assets that can make a difference today for people on the ground in South Asia.

I also believe the United States should make a long-term investment in rebuilding the areas devastated by the earthquake. We have strong partnerships with the nations of South Asia, and we have strong affection for their people. We must commit to work with our friends for as long as it takes to help them rebuild their infrastructure, with a particular emphasis on boosting medical resources for a health care system now overwhelmed by caring for the weak and injured.

The people and governments of Pakistan, India and Afghanistan must know that the United States will be an unwavering partner in their recovery and reconstruction. Our U.S. military and the employees of the State Department and USAID are working hard to extend support to our friends in this terrible time of need. We thank them for their service and pledge that we, too, will do our part.

SENATE CONCURRENT RESOLUTION 65—RECOGNIZING THE BENEFITS AND IMPORTANCE OF FEDERALLY-QUALIFIED HEALTH CENTERS AND THEIR MEDICAID PROSPECTIVE PAYMENT SYSTEM

Mr. BURR (for himself, Mr. OBAMA, Mr. BINGAMAN, Mr. BOND, Mr. KERRY, Mr. SMITH, Mr. SALAZAR, Mr. SCHUMER, Mr. DURBIN, Ms. COLLINS, and Ms. SNOWE) submitted the following concurrent resolution; which was referred to the Committee on Finance:

S. CON. RES. 65

Whereas community, migrant, public housing, and homeless health centers form the backbone of the health care safety net of the United States, providing health care to nearly 6,000,000 of the 53,000,000 people enrolled in the Medicaid Program nationwide;

Whereas health center patients are more likely than the general population to be enrolled in Medicaid, with 36 percent of all

health center patients enrolled in Medicaid compared to 12 percent nationally;

Whereas in 1989, Congress established the services of the Federally-qualified health center (FQHC) program as a guaranteed benefit under Medicaid to protect the valuable resources intended to assist health centers in caring for the uninsured;

Whereas health centers have doubled the number of uninsured people served since 1989, a growth rate more than twice that of the uninsured population of the United States;

Whereas health centers provided 17 percent of all Medicaid and State Health Insurance Program office visits in 2001;

Whereas Medicaid on average contributes 36 percent of a health center's budget, with the remainder provided by Federal grants, State and local governments, Medicare, private contributions, private insurance, and patient fees;

Whereas the cost of treating health center Medicaid patients is 30 to 34 percent less than the cost of treating those that receive care elsewhere, and similarly, 26 to 40 percent lower for prescription drug costs, 35 percent lower for diabetics, and 20 percent lower for asthmatics;

Whereas health center Medicaid patients are 22 percent less likely to be hospitalized for conditions that were potentially avoidable than those obtaining care elsewhere;

Whereas a bipartisan majority of Congress in 2000 established a prospective payment system (PPS) to ensure that Federally-qualified health centers receive sufficient Medicaid funding, thereby striking a balance between protecting the Federal investment in health centers and providing State flexibility in designing the payment system for these centers;

Whereas the prospective payment system has allowed States to appropriately predict and budget the cost of health center Medicaid expenditures;

Whereas the prospective payment system has allowed health centers to provide and expand primary care services to more people in need, while promoting efficient operation of and ensuring adequate Medicaid reimbursement for these centers;

Whereas without the assurance of sufficient Medicaid funding under the prospective payment system, health centers would be forced to cross-subsidize Medicaid underpayments with Federal grant dollars intended to care for the uninsured;

Whereas if the PPS were eliminated or changed, entire communities could be left without any access to primary and preventive health care services, thus undoing decades of investment by Congress in providing a health care safety net;

Whereas health centers provide cost-effective, high-quality health care to the poor of the Nation and the medically underserved, including the working poor, the uninsured, and many high-risk and vulnerable populations; and

Whereas health centers act as a vital safety net in the health delivery system of the Nation, meeting escalating health needs, and reducing health disparities: Now, therefore, be it

Resolved by the Senate (the House of Representatives concurring), That—

(1) it is the sense of Congress that the Medicaid prospective payment system for the Federally-qualified health center program is critical to ensuring that both Medicaid recipients and the uninsured population of the Nation have access to quality affordable primary and preventive care services; and

(2) Congress recognizes the critical role of health centers as an essential source of health care for millions of Medicaid recipients and uninsured Americans and supports continuation of the prospective payment system in helping to maintain this system of health care.

Mr. OBAMA. Mr. President, today, Senator BURR and I are introducing a resolution that reaffirms the importance of the Medicaid prospective payment system for federally qualified health centers.

Federally qualified health centers—community, migrant, public housing, and homeless health centers—form the backbone of the Nation's health care safety net. FQHC's provide cost-effective, high-quality health care to the Nation's poor and medically underserved, including the working poor, the uninsured, and many high-risk and vulnerable populations.

Federally qualified health centers serve nearly 1 of 5 low-income children. Two-thirds of health center patients are members of racial and ethnic minority groups. And over 675,000 homeless persons receive care at health centers every year.

FQHC's play a particularly critical role in serving patients enrolled in Medicaid. Health centers provide care to nearly 6 million of the 53 million people enrolled in the Medicaid Program nationwide. Thirty-six percent of all FQHC patients are Medicaid beneficiaries compared to 12 percent nationally. Notably, the cost of treating Medicaid patients at FQHCs is about one-third less than the cost for those receiving care elsewhere, with drug costs alone about 25 percent lower.

In 2000, a bipartisan majority of the Congress established a prospective payment system, or PPS, to ensure that FQHC's receive fair Medicaid reimbursement. This system strikes a balance between protecting Federal investment in such health centers and allowing State flexibility in designing the payment system for these centers. The PPS allows health centers to provide and expand primary care services to more people in need, promotes efficient operation of FQHC's, and ensures they receive adequate Medicaid reimbursement.

Today, PPS has allowed health centers to provide quality health care to nearly 15 million people nationally, while also delivering significant cost savings to the Medicaid Program. Congress should recognize the critical role of such health centers as the primary source of care for millions of Medicaid recipients and uninsured Americans and support continuation of the prospective payment system.

SENATE CONCURRENT RESOLUTION 66—AFFIRMING THAT THE INTENT OF CONGRESS IN PASSING THE NATIONAL WILDLIFE REFUGE SYSTEM IMPROVEMENT ACT OF 1997 WAS TO ALLOW HUNTING AND FISHING ON PUBLIC LAND WITHIN THE NATIONAL WILDLIFE REFUGE SYSTEM AND DECLARING THAT THE PURPOSE OF RESERVING CERTAIN LAND AS PUBLIC LAND IS TO MAKE THE LAND AVAILABLE TO THE PUBLIC FOR REASONABLE USES

Mr. VITTER submitted the following concurrent resolution; which was referred to the Committee on Energy and Natural Resources:

S. CON. RES. 66

Whereas hunting and fishing have a long and distinguished history in the United States;

Whereas hunting and fishing remain an important part of the lifestyle and culture of people from many different areas of the country and from all walks of life;

Whereas sportsmen and sportswomen have worked for decades to ensure that public land and other land that is used for hunting and fishing is cared for, protected, and preserved;

Whereas the land that makes up the National Wildlife Refuge System has been widely used for hunting, fishing, and other sporting purposes;

Whereas in 1997, Congress passed the National Wildlife Refuge System Improvement Act of 1997 (Public Law 105-57; 111 Stat. 1252), which clearly and directly stated that hunting and fishing, as wildlife-dependent recreational activities, could be considered compatible uses of public land, including land within the National Wildlife Refuge System; and

Whereas the National Wildlife Refuge System Improvement Act of 1997 (Public Law 105-57; 111 Stat. 1252) passed by a vote of 419-1, demonstrating the nonpartisan nature of the legislation and the tremendous amount of support the legislation enjoyed: Now, therefore, be it

Resolved by the Senate (the House of Representatives concurring), That—

(1) in passing the National Wildlife Refuge System Improvement Act of 1997 (Public Law 105-57; 111 Stat. 1252), Congress demonstrated its clear intent to allow hunting and fishing on the public land within the National Wildlife Refuge System;

(2) the intent of Congress has not changed in any way since the date of enactment of that Act, and any assumption to the contrary is misguided and misinterprets the clear intent of Congress; and

(3) the general purpose of reserving certain land as public land, including the land within the National Wildlife Refuge System, is to make the land available to the public for reasonable uses, including hunting, fishing, other wildlife-dependent sports, and other outdoor purposes.

AMENDMENTS SUBMITTED AND PROPOSED

SA 2598. Mr. LAUTENBERG submitted an amendment intended to be proposed by him to the bill S. 2020, to provide for reconciliation pursuant to section 202(b) of the concurrent resolution on the budget for fiscal year 2006; which was ordered to lie on the table.

SA 2599. Mr. CONRAD (for himself, Mr. DORGAN, and Mr. SMITH) submitted an

amendment intended to be proposed by him to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2600. Mr. SHELBY proposed an amendment to the bill S. 467, to extend the applicability of the Terrorism Risk Insurance Act of 2002.

SA 2601. Mr. NELSON of Florida (for himself, Mr. DORGAN, Mr. LEAHY, Mr. SCHUMER, Mr. DAYTON, Ms. STABENOW, Mr. KOHL, Mrs. MURRAY, Mr. OBAMA, Mrs. CLINTON, Ms. LANDRIEU, Mr. HARKIN, and Mr. DURBIN) submitted an amendment intended to be proposed by him to the bill S. 2020, to provide for reconciliation pursuant to section 202(b) of the concurrent resolution on the budget for fiscal year 2006.

SA 2602. Mr. CONRAD proposed an amendment to the bill S. 2020, supra.

SA 2603. Mr. PRYOR submitted an amendment intended to be proposed by him to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2604. Mrs. CLINTON (for herself and Mr. OBAMA) submitted an amendment intended to be proposed by her to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2605. Mr. OBAMA (for himself, Mr. COBURN, Mr. LAUTENBERG, Ms. SNOWE, Mr. JOHNSON, and Mr. ENSIGN) submitted an amendment intended to be proposed by him to the bill S. 2020, supra.

SA 2606. Mr. KERRY (for himself and Mr. WYDEN) submitted an amendment intended to be proposed by him to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2607. Mr. SUNUNU submitted an amendment intended to be proposed by him to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2608. Ms. MURKOWSKI (for herself, Mr. JOHNSON, and Mr. BINGAMAN) submitted an amendment intended to be proposed by her to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2609. Mrs. FEINSTEIN (for herself, Mr. SUNUNU, Mr. GREGG, Mr. WYDEN, Ms. CANTWELL, Mr. FEINGOLD, Mr. BURR, Mr. MCCAIN, Mr. KERRY, Ms. COLLINS, and Mrs. CLINTON) proposed an amendment to the bill S. 2020, supra.

SA 2610. Mrs. FEINSTEIN (for herself and Mr. KERRY) proposed an amendment to the bill S. 2020, supra.

SA 2611. Mr. SCHUMER (for himself, Mr. LAUTENBERG, Mrs. FEINSTEIN, Mr. FEINGOLD, Mrs. CLINTON, Mr. KERRY, Mr. LIEBERMAN, Mr. SALAZAR, Mrs. BOXER, Ms. STABENOW, Ms. MIKULSKI, Mr. KOHL, and Mr. KENNEDY) submitted an amendment intended to be proposed by him to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2612. Ms. CANTWELL (for herself, Mr. BAYH, Mr. LIEBERMAN, Mr. SCHUMER, Mrs. BOXER, Mr. CARPER, Mrs. CLINTON, Mr. SALAZAR, Mr. KOHL, Mrs. MURRAY, Ms. STABENOW, and Mrs. FEINSTEIN) proposed an amendment to the bill S. 2020, supra.

SA 2613. Mr. KENNEDY (for himself, Mr. BINGAMAN, Mr. LEVIN, Mr. DURBIN, and Ms. MIKULSKI) submitted an amendment intended to be proposed by him to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2614. Mr. PRYOR submitted an amendment intended to be proposed by him to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2615. Ms. COLLINS submitted an amendment intended to be proposed by her to the bill S. 2020, supra; which was ordered to lie on the table.

SA 2616. Mr. KERRY (for himself and Mr. OBAMA) submitted an amendment intended to be proposed by him to the bill S. 2020, supra.

SA 2617. Mr. SANTORUM submitted an amendment intended to be proposed by him